

PTO/SB/21
0055.0022#11
WM
9/11/03

TRANSMITTAL FORM (To be used for all correspondence after initial filing)	Application Number	09/627,662
	Filing Date	July 28, 2000
	Inventor	S. S. Lightstone et al
	Group Art Unit	2172
	Examiner Name	Anh Ly
Total Number of Pages in this Submission: 3	Attorney Docket Number	CA990022US1

RECEIVED

AUG 28 2003

Technology Center 2100


ENCLOSURES (check all that apply)

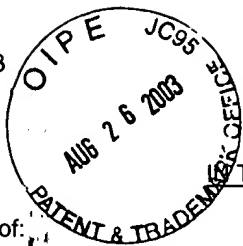
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits /Declarations <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement; ___ references <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an application) <input checked="" type="checkbox"/> Formal Drawing(s); <u>2</u> sheets <input type="checkbox"/> Licensing-related papers <input type="checkbox"/> Petition: _____ <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, and/or Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) ___	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Certificate of Correction <input type="checkbox"/> Other Enclosure(s) (please identify below)
--	--	---

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name:	Rabindranath Dutta, Registration No. 51,010
Signature:	
Date:	August 22, 2003
KONRAD RAYNES VICTOR & MANN, LLP 315 South Beverly Drive, Suite 210 Beverly Hills, California 90212 (310) 556-7983	
<input checked="" type="checkbox"/> The Commissioner is authorized to charge any deficiency of fees, or credit any overpayment, to Deposit Account No. 09-0460	

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Commissioner for Patents, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO, on the date indicated below.	
Typed or Printed name:	Rabindranath Dutta
Signature:	<i>Rabindranath Dutta</i>
Date:	August 22, 2003
 24033 PATENT TRADEMARK OFFICE	



THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:
 S. S. Lightstone et al.,
 Serial No.: 09/627,662
 Filed: July 28, 2000
 For: HEURISTIC-BASED CONDITIONAL
 DATA INDEXING

Examiner: Anh Ly

Art Unit: 2172



24033

PATENT TRADEMARK OFFICE

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith in the above-identified application is an:

- ☒ Amendment 21 pages.
☐ Petition for Extension of Time.
☒ Transmittal of Formal Drawings and 2 sheets of formal drawings.
☒ Return Postcard.
☒ No additional fee is required.

The fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO PREVIOUSLY PAID FOR		PRESENT EXTRA RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	30	MINUS	56	=	0	x	\$0	OR	x 18 \$
INDEP CLAIMS	3	MINUS	8	=	0	x	\$0	OR	x 84 \$
____ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM						+	\$	OR	+ 280 \$
						TOTAL	\$0	OR	TOTAL \$ 0

- ____ Please charge Deposit Account No. 09-0460 the amount of \$ ____ to cover the extension fee and also the amount of \$ ____ to cover the claim fee. A duplicate copy of this sheet is enclosed.
 ____ A check in the amount of \$ ____ to cover the extension fee is enclosed.
 ____ A check in the amount of \$ ____ to cover the filing fee is enclosed.
 ____ A check in the amount of \$ ____ to cover the petition fee is enclosed.
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 09-0460. A duplicate of this sheet is enclosed.
☒ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
☒ Any patent application processing fees under 37 CFR 1.17.

Respectfully submitted,

Dated: August 22, 2003

Rabindranath Dutta
 Registration No. 51,010
 KONRAD RAYNES VICTOR & MANN, LLP
 315 S. Beverly Drive, Suite 210
 Beverly Hills, CA 90212
 (310) 556-7983 (voice)
 (310) 556-7984 (fax)

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Alexandria, P.O. Box 1450, VA 22313-1450 on August 22, 2003.

Rabindranath Dutta

Date

8/22/03